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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION**
(37 CFR 1.63)

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	GKNG 1264 PCT
First Named Inventor	ULRICH BROCHHEUSER, ET AL.
COMPLETE IF KNOWN	
Application Number	10 / 562,349
Filing Date	DECEMBER 27, 2005
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BACKWARD EXTRUSION PROCESS FOR INNER PROFILES

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 12/27/2005 as United States Application Number or PCT InternationalApplication Number 10/562,349 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
PCT/EP 2005/006027 10 2004 039 967.0	Germany	06/04/2005	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Germany	08/18/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

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<p>- ROBERT P. RENKE ARTZ & ARTZ, P.C.</p> <p>Name</p> <p>28333 TELEGRAPH ROAD SUITE 250</p> <p>Address</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">City</td> <td>SOUTHFIELD</td> <td>State</td> <td>MI</td> <td>ZIP</td> <td>48034</td> </tr> <tr> <td>Country</td> <td>U.S.A.</td> <td>Telephone</td> <td colspan="2">248-223-9500</td> <td>Fax 248-223-9522</td> </tr> </table>						City	SOUTHFIELD	State	MI	ZIP	48034	Country	U.S.A.	Telephone	248-223-9500		Fax 248-223-9522
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>																	
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any])		ULRICH	Family Name or Surname	BROCHHEUSER													
Inventor's Signature				Date 13.01.06.													
Residence: City		NEUNKIRCHEN	State	GERMANY	CITIZENSHIP												
Mailing Address NIEDERHORBACHER STRASSE 17																	
City		NEUNKIRCHEN	State	ZIP D-53819	Country GERMANY												
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any])		ANDREAS	Family Name or Surname	GEHRKE													
Inventor's Signature				Date 13.01.2006													
Residence: City		SIEGBURG	State	GERMANY	CITIZENSHIP												
Mailing Address AUF DER PAPAGEI 43																	
City		SIEGBURG	State	ZIP D-53721	Country GERMANY												
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.																	

PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/562,349
Filing Date	December 27, 2005
First Named Inventor	ULRICH BROCHHEUSER, ET AL.
Title	BACKWARD EXTRUSION PROCESS FOR INNER PROFILES
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1264 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

027256

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City	State
Country	Zip
Telephone	Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	ANDREAS GEHRKE	Date	13.01.2006
Name	<i>Andreas Gehrke</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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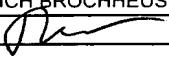
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SIGNATURE of Applicant or Assignee of Record

Signature	ULRICH BROCHHEUSER	Date	13.01.06
Name		Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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